## **REMARKS**

Claim 23, 28, and 31 to 34 have been amended. Claims 1 to 22; 24 to 27; 29; and 30 have been previously canceled. New claims 35 to 38 have been added. No new matter has been added.

Claims 23; 28; and 31 to 38 remain in the application. Of these, claims 23 and 32 are independent method claims. Claims 28; 31; 35; and 36 are dependent upon independent claim 23. Claims 33; 34; 37; and 38 are dependent upon independent claim 32. Claims 28; 31; 35; and 36, and claims 33; 34; 37; and 38 contain parallel subject matter.

As amended, both independent claims 23 and 32 define a method comprising identifying an aorta having an aneurysm and a neck region proximal to the aneurysm and adjacent a renal artery. As amended, both independent claims 23 and 32 define providing a first prosthesis comprising a first trunk including a fabric prosthetic material and a scaffold that supports the prosthetic material to define a lumen within the first trunk. In both independent claims, the first trunk is defined as being sized and configured for placement in the neck region to provide reinforcement to the neck region. As defined in both independent claims, the first trunk includes a proximal region (deployed closest to the head), and a distal region.

Claims 23 and 32 differ in that, in claim 23, the <u>fabric prosthetic material</u> of the proximal region and the distal region is defined as being dense <u>to reinforce the proximal region and the distal region</u> – whereas in claim 32, the <u>scaffold</u> of the proximal region and the distal region is defined as being dense <u>to reinforce the proximal region and the distal region</u>.

Other than the foregoing difference, independent claims 23 and 32 are the same. Both define providing a second prosthesis comprising a second trunk including a fabric prosthetic material and a scaffold that supports the prosthetic material to define a lumen within the second trunk. The second trunk is sized and configured for placement in the aneurysm to bridge the aneurysm. The second trunk includes a proximal region and a distal region.

Both independent claims 23 and 32 define providing a plurality of tissue-piercing fasteners, and providing an intraluminal fastener attachment assembly that can be manipulated to implant at least one of the plurality of tissue-piercing fasteners into tissue in the neck region. Both independent claims 23 and 32 define deploying the first prosthesis in the neck region with the proximal region placed adjacent a renal artery and the distal region placed adjacent the aneurysm, and deploying the second prosthesis in the aneurysm. Both independent claims 23 and 32 define

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telescopically fitting the distal region of the first trunk and the proximal region of the second trunk to form a composite prosthesis, the distal region of the first trunk resisting migration of the second trunk. Both independent claims define manipulating the intraluminal fastener attachment assembly to implant at least one of the plurality of tissue-piercing fasteners into tissue in the neck region through the proximal region of at least one of the first trunk and the second trunk to anchor the composite prosthesis, the tissue-piercing fastener being retained in the proximal region of the at least one of the first trunk and the second trunk. And, both independent claims define manipulating the intraluminal fastener attachment assembly to implant another of the at least one of a plurality of tissue-piercing fasteners into tissue in the neck region through the telescopically fitted distal region of the first trunk and the proximal region of the second trunk to anchor the composite prosthesis, the tissue-piercing fastener being retained in the telescopically fitted distal region of the first trunk and the proximal region of the second trunk.

Claim 23 stands rejected under 35 U.S.C. 103(a) based upon Parodi et al (WO 00/16701) in view of Taheri et at. (US 5,591,195), Pinchuk (US 5,855,598), and Layne et al. (US 6,398,803).

Claim 32 stands rejected under 35 U.S.C. 103(a) based upon Parodi et al (WO 00/16701) in view of Taheri et at. (US 5,591,195), and Pinchuk (US 5,855,598).

Neither Parodi nor Taheri nor Pinchuk, with or without Layne, teaches or suggests a method including providing a composite prosthesis formed between first and second prostheses, in which the first prosthesis is sized and configured for placement in a neck region proximal to an aneurysm and adjacent a renal artery, and includes a proximal region and a distal region – formed either by a dense prosthetic material (claim 23) or by a dense scaffold (claim 32), the first prosthesis to be telescopically fitted to a proximal region of the second prosthesis (which is sized and configured for placement in the aneurysm to bridge the aneurysm), and implanting at least one of a plurality of tissue-piercing fasteners, with at least one of the plurality of tissue-piercing fasteners being implanted into tissue in the neck region through the proximal region of at least one of the first trunk and the second trunk to anchor the composite prosthesis, and retained in the proximal region of the at least one of the first trunk and the second trunk, and implanting another of the at least one of the plurality of tissue-piercing fasteners into tissue in the neck region through the telescopically fitted distal region of the first trunk and the proximal region of the second trunk to anchor the composite

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prosthesis, and retained in the telescopically fitted distal region of the first trunk and the proximal

region of the second trunk.

Accordingly, Applicants request the withdrawal of the rejection under 35 U.S.C. 103(a).

New claims 35 and 37 further define the method of claim 23 and 32 respectively, including performing the telescopically fitting step after the step of manipulating the intraluminal fastener

attachment assembly. Support can be found at least at page 11, line 30 through page 12, line 33.

New claims 36 and 38 further define the method of claim 23 and 32 respectively, including implanting another of the plurality of tissue-piercing fasteners into tissue in the neck region through the distal region of the first trunk. Support can be found at least at page 11, line 30 through page 12,

line 33, and the Figures, including Figures 5A and 6A.

For these reasons, applicant believes that Claims 23; 28; and 31 to 38 are in condition for allowance. If the Examiner believes that questions or matters of clarification remain, applicant believes that such matters can be handled expeditiously by an interview by telephone to advance prosecution of this case, and the applicant is committed to proceed on that basis.

Respectfully Submitted,

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8 May, 2009

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